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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/707,672
	Filing Date	12/31/2003
	First Named Inventor	William C. Hiscox
	Art Unit	1616
	Examiner Name	CHOI, FRANK I
	Attorney Docket Number	217604222003

I hereby revoke all previous powers of attorney given in the above-identified application.

☒ A Power of Attorney is submitted herewith.

OR

☐ I hereby appoint the practitioners associated with the Customer Number:

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OR

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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature					
Name	William C. Hiscox				
Date	June 19, 2007	Telephone	509-979-6142		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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